

Candidate Intention Statement

Type or Print in Ink.

CANDIDATE INTENTION STATEMENT

RECEIVED Date Stamp NOV 30 2005 City Clerk City of Lodi	CALIFORNIA FORM 501
	For Official Use Only

Check One: ☒ Initial ☐ Amendment (Explain) _____

1. Candidate Information:

NAME OF CANDIDATE (Last, First, Middle Initial) <u>Beckman, John R</u>	DAYTIME TELEPHONE NUMBER <u>209 327-5363</u>	FAX NUMBER (optional) <u>()</u>	E-MAIL (optional) <u>JOHNBECKMAN@COMCAST.NET</u>
STREET ADDRESS <u>1536 BURGUNDY DR</u>	CITY <u>LODI</u>	STATE <u>CA</u>	ZIP CODE <u>95242</u>
OFFICE SOUGHT (POSITION TITLE) <u>CITY COUNCIL</u>	AGENCY NAME <u>LODI</u>	DISTRICT NUMBER, if applicable.	<input checked="" type="checkbox"/> NON-PARTISAN PARTY:
OFFICE JURISDICTION <input type="checkbox"/> State (Complete Part 2.) <input checked="" type="checkbox"/> City <input type="checkbox"/> County <input type="checkbox"/> Multi-County: _____ (Name of Multi-County Jurisdiction)			
(Year of Election) <u>2006</u> (Year of Election)			

2. State Candidate Expenditure Limit Statement:

(CalPERS candidates, judges, judicial candidates, and candidates for local offices are not required to complete Part 2.)

(Year of Election) **Primary/general election** _____
(Year of Election) **Special/runoff election**

(Check one box)

☐ I accept the voluntary expenditure ceiling for the election stated above.

☐ I do not accept the voluntary expenditure ceiling for the election stated above.

Amendment:

☐ I did not exceed the expenditure ceiling in the primary or special election held on: ____/____/____ and I accept the voluntary expenditure ceiling for the general or special run-off election.

(Mark if applicable)

☐ On ____/____/____, I contributed personal funds in excess of the expenditure ceiling for the election stated above.

3. Verification:

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on 11-29-05
(month, day, year)

Signature [Signature]
(Candidate)